

SERFF Tracking #:	SLIN-128808971	State Tracking #:	Company Tracking #:
State:	District of Columbia	Filing Company:	Sentry Life Insurance Company
TOI/Sub-TOI:	H10G Group Health - Dental/H10G.000 Health Dental		
Product Name:	Dental		
Project Name/Number:	Dental Rate Filing 2013 rates/		

Rate Information

Rate data applies to filing.

Filing Method:	Prior Approval
Rate Change Type:	Neutral
Overall Percentage of Last Rate Revision:	0.500%
Effective Date of Last Rate Revision:	01/01/2012
Filing Method of Last Filing:	Prior Approval

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Sentry Life Insurance Company	1.000%	0.000%	\$0	0	\$0	0.000%	0.000%

State:	District of Columbia	Filing Company:	Sentry Life Insurance Company
TOI/Sub-TOI:	H10G Group Health - Dental/H10G.000 Health Dental		
Product Name:	Dental		
Project Name/Number:	Dental Rate Filing 2013 rates/		

Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information		Attachments
1		2013 Dental Rates	785-3000	Revised	Previous State Filing Number:	SELX-G127718590	DC Experience Exhibits 2013.xls
					Percent Rate Change Request:		

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Product Name:	Dental		
Project Name/Number:	Dental Rate Filing 2013 rates/		

Attachment DC Experience Exhibits 2013.xls is not a PDF document and cannot be reproduced here.

SERFF Tracking #:	SLIN-128808971	State Tracking #:	Company Tracking #:
State:	District of Columbia	Filing Company:	Sentry Life Insurance Company
TOI/Sub-TOI:	H10G Group Health - Dental/H10G.000 Health Dental		
Product Name:	Dental		
Project Name/Number:	Dental Rate Filing 2013 rates/		

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Cover Letter All Filings		
Comments:			
Attachment(s):			
DC Cover Letter.pdf			

		Item Status:	Status Date:
Bypassed - Item:	Certificate of Authority to File		
Bypass Reason:	Not a third party filing.		

		Item Status:	Status Date:
Satisfied - Item:	Actuarial Memorandum		
Comments:			
Attachment(s):			
DC Actuarial Memo Dental 2013.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Actuarial Justification		
Comments:			
Attachment(s):			
DC Rate Comparison Exhibit 2013.pdf			

		Item Status:	Status Date:
Bypassed - Item:	District of Columbia and Countrywide Loss Ratio Analysis (P&C)		
Bypass Reason:	Not P&C		

		Item Status:	Status Date:
Bypassed - Item:	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)		

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TOI/Sub-TOI:	H10G Group Health - Dental/H10G.000 Health Dental		
Product Name:	Dental		
Project Name/Number:	Dental Rate Filing 2013 rates/		

Bypass Reason:	Not a P&C filing
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		Item Status:	Status Date:
Bypassed - Item:	Rate Summary Worksheet		
Bypass Reason:	Excepted benefit		

Sentry Life Insurance Company
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January 25, 2013

SENTRY LIFE INSURANCE COMPANY
NAIC # 169-68810
FEIN # 39-6040276
GROUP DENTAL RATE FILING
H10G Group Health - Dental
H10G.000 Health - Dental
COMPANY FILING NUMBER: SLIN-128720034

The purpose of this filing is to revise group dental indemnity rates. I had previously submitted this under filing SLIN-128720034.

An Actuarial Memorandum, exhibit and filing transmittal form are included in support of this filing.

The proposed effective date of the new rates is March 1, 2013, or upon approval. We do not have any DC residents insured, so there is no impact on any DC residents.

To help expedite this approval, the answers to the previous objections are as follows:

A line-by-line break out of the expense assumptions being used as a percent of premium:

Benefits: 65%
Commission, Sales Support, and Related Expenses: 15%
Administration and Overhead Expenses: 15%
Profit and Additional Margin: 5%
Total 100%

The Lifetime Expected Loss Ratio is 66.1%

There is no accompanying forms filing. I do not have a SERFF number for the forms. It would appear that this was originally a paper filing. The original paper filing in 2001 shows a filing number of DN DC0018404F01. We had also added some orthodontics pages on in 2003 with a filing number of DN DC0093804F01

Again, we have no DC residents currently insured, so this increase is to keep our national rates consistent in the event we make any DC sales.

We trust with the enclosed information you will be able to review our filing and grant an approval. If you have any questions, please contact me.

Thank you.

Brian Warner
Compliance/Development

**SENTRY LIFE INSURANCE COMPANY
WASHINGTON D.C. DENTAL RATE FILING
ACTUARIAL MEMORANDUM
Policy Forms: 785-3000 through 785-3110**

SCOPE AND PURPOSE

This is a group dental rate revision filing for the dental plans listed above currently marketed by Sentry Life Insurance Company. This rate filing actuarial memorandum is not intended to be used for other purposes.

This rate filing is a notice of intent to keep the overall rates at current levels. Rate changes at individual account levels may vary from existing rates by +/- 3%. The net overall impact is expected to result in no change from current rates. The small rate changes result from the conversion to a new administration system that calculates rates differently.

The rating period covered by this filing begins on 1/1/2013 and extends into the future until a new rate filing is made.

Rate adjustments are applied on the annual renewal date for each policy. The rates on each policy remain level for one year after the renewal date.

CONTRACT SPECIFICATIONS AND DESCRIPTIONS

This policy is a Group Dental Indemnity plan with several optional benefit levels. Optional deductible amounts are \$0, \$50 and \$100. Preventative services (Class 1) can be selected to be paid at 80% or 100%. Basic services (Class 2) are paid at 80% and Major services (Class 3) are paid at 50% in all cases. The annual maximums can be selected at \$500, \$1,000, \$1,500 or \$2,000. Orthodontics coverage is also available at an additional premium.

The policies should be consulted for a complete description of benefits.

This product is sold primarily through captive agents ("sales representatives") employed by Sentry.

RENEWABILITY PROVISION

This policy form is conditionally renewable upon Sentry's approval, subject to the provisions of the policy.

ISSUE AGE LIMITS

There are no age limits under this policy. It is sold primarily to employers for the benefit of the employees, who can be any age.

INTEREST RATE ASSUMPTIONS

An interest rate assumption is not used in pricing this product since reserves are minimal. Policies do not have a long-term rate guarantee; therefore, there are no active life reserves. Dental claims are paid out quickly; therefore, claims reserves that are of significant magnitude or for long durations do not develop.

SUMMARY OF PROPOSED MODIFICATIONS

A summary of the changes being proposed is documented in Exhibit B.

RATE CLASSIFICATIONS

Premium rates vary by plan, family composition, group size and area factor. A policy fee may be assessed to cover administration costs. For larger groups or special classes of insureds, discounts or other premium adjustments may be given based on experience of the groups. The attached Rate Exhibits contain proposed rates for all of the plans described above.

PRICING MEHODOLOGY AND ASSUMPTIONS

The indicated rate level was calculated by bringing the last 12 months of premium up to the current rate level, and trending incurred claims to the mid-point of the renewal period (1/1/2013 to 12/31/2013). Incurred claims are developed using a claims completion method to translate claims paid by incurred date to incurred claims. Since policies renew annually there are no active life reserves.

Trend was assumed to average 6.0% based on historical experience and industry studies. The projected loss ratio is calculated from historical experience by applying trend to claims. Premium is adjusted to current rate levels. The projected loss ratio is calculated as projected incurred claims divided by the adjusted premium. The projected loss ratio divided by the priced for loss ratio is the needed premium increase. The indicated rate increase using this method is 1.0%. See the attached Experience Exhibit for numerical details of the experience and projections.

PROPOSED EFFECTIVE DATE

The rates are to be effective at renewal or new issue on or after January 1, 2012. Rates will be guaranteed for one year following the effective date of the change for each policy.

TARGET LOSS RATIO

These plans were priced with an expected minimum loss ratio of 65%. This leaves 35% or less to cover company expenses and a provision for profit and contingencies.

RATE HISTORY**Policy Forms 785-3000 et al – Standard Plans**

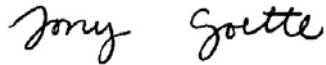
Effective Date	Annual Increase
6/2004	Policy was first approved for sale.
1/2006	7.0%
1/2007	8.9%
1/2008	2.0% to 10.1%
1/2009	2.0%
4/2009	2.0%
7/2009	2.0%
10/2009	2.0%
1/2010	2.0%
4/2010	2.0%
7/2010	2.0%
10/2010	2.0%
1/2011	2.0%
4/2011	2.0%
7/2011	2.0%
10/2011	2.0%
1/2012	-19.2% to 1.0%
4/2012	1.0%
7/2012	1.0%
10/2012	1.0%

EXHIBITS: See attached Exhibits for additional information required for this state.

CERTIFICATION

I, Tony Goettl, am employed by Sentry Life Insurance Company as Actuary – Life and Health. I am a member of the Society of Actuaries and the American Academy of Actuaries in good standing. I meet the Qualification Standards to render this opinion.

I certify that to the best of my knowledge and judgment this rate filing is in compliance with the applicable laws and regulations of this state and that the benefits are reasonable in relation to the premium. I also certify that these rates are not excessive, inadequate or unfairly discriminatory.



Tony Goettl, FSA, MAAA
Actuary – Life & Health
Sentry Life Insurance Company

10/26/2012

Date

Sentry Life Insurance Company
Monthly Gross Premium Rates
Group Dental Indemnity Policy Form #785-3000 through 785-3110
CURRENT RATES - Effective 10/1/2012

Exhibit B

Without Ortho						
Deductible	Coinsurance	Year Max	Employee	Employee & Spouse	Employee & Children	Full Family
\$0	100/80/50%	\$500	\$34.75	\$72.97	\$79.92	\$111.19
\$50	100/80/50%	\$500	\$31.63	\$66.40	\$72.74	\$101.20
\$100	100/80/50%	\$500	\$28.68	\$60.21	\$65.95	\$91.76
\$0	80/80/50%	\$500	\$32.83	\$68.94	\$75.50	\$105.06
\$50	80/80/50%	\$500	\$29.68	\$62.33	\$68.26	\$94.97
\$100	80/80/50%	\$500	\$26.75	\$56.17	\$61.51	\$85.58
\$0	100/80/50%	\$1,000	\$53.50	\$112.36	\$123.07	\$171.23
\$50	100/80/50%	\$1,000	\$49.58	\$104.10	\$114.02	\$158.63
\$100	100/80/50%	\$1,000	\$45.86	\$96.32	\$105.50	\$146.76
\$0	80/80/50%	\$1,000	\$49.60	\$104.13	\$114.06	\$158.68
\$50	80/80/50%	\$1,000	\$45.68	\$95.91	\$105.04	\$146.15
\$100	80/80/50%	\$1,000	\$41.96	\$88.12	\$96.51	\$134.28
\$0	100/80/50%	\$1,500	\$63.96	\$134.31	\$147.11	\$204.67
\$50	100/80/50%	\$1,500	\$59.43	\$124.80	\$136.68	\$190.17
\$100	100/80/50%	\$1,500	\$55.15	\$115.81	\$126.84	\$176.46
\$0	80/80/50%	\$1,500	\$58.71	\$123.28	\$135.02	\$187.86
\$50	80/80/50%	\$1,500	\$54.17	\$113.77	\$124.61	\$173.36
\$100	80/80/50%	\$1,500	\$49.91	\$104.81	\$114.79	\$159.72
\$0	100/80/50%	\$2,000	\$67.35	\$141.43	\$154.90	\$215.51
\$50	100/80/50%	\$2,000	\$62.66	\$131.59	\$144.11	\$200.50
\$100	100/80/50%	\$2,000	\$58.22	\$122.26	\$133.91	\$186.31
\$0	80/80/50%	\$2,000	\$61.31	\$128.75	\$141.01	\$196.19
\$50	80/80/50%	\$2,000	\$56.59	\$118.84	\$130.16	\$181.09
\$100	80/80/50%	\$2,000	\$52.15	\$109.52	\$119.95	\$166.88

With Ortho						
Deductible	Coinsurance	Year Max	Employee	Employee & Spouse	Employee & Children	Full Family
\$0	100/80/50%	\$500	\$36.85	\$77.18	\$97.72	\$131.08
\$50	100/80/50%	\$500	\$33.73	\$70.61	\$90.54	\$121.10
\$100	100/80/50%	\$500	\$30.78	\$64.41	\$83.75	\$111.66
\$0	80/80/50%	\$500	\$34.94	\$73.15	\$93.30	\$124.95
\$50	80/80/50%	\$500	\$31.78	\$66.53	\$86.05	\$114.87
\$100	80/80/50%	\$500	\$28.85	\$60.37	\$79.31	\$105.48
\$0	100/80/50%	\$1,000	\$55.60	\$116.57	\$140.87	\$191.12
\$50	100/80/50%	\$1,000	\$51.68	\$108.30	\$131.82	\$178.53
\$100	100/80/50%	\$1,000	\$47.97	\$100.52	\$123.29	\$166.66
\$0	80/80/50%	\$1,000	\$51.70	\$108.33	\$131.85	\$178.58
\$50	80/80/50%	\$1,000	\$47.78	\$100.12	\$122.84	\$166.05
\$100	80/80/50%	\$1,000	\$44.06	\$92.32	\$114.31	\$154.18
\$0	100/80/50%	\$1,500	\$66.06	\$138.52	\$164.91	\$224.57
\$50	100/80/50%	\$1,500	\$61.53	\$129.00	\$154.48	\$210.06
\$100	100/80/50%	\$1,500	\$57.25	\$120.01	\$144.63	\$196.36
\$0	80/80/50%	\$1,500	\$60.81	\$127.48	\$152.82	\$207.76
\$50	80/80/50%	\$1,500	\$56.28	\$117.98	\$142.41	\$193.26
\$100	80/80/50%	\$1,500	\$52.01	\$109.01	\$132.59	\$179.61
\$0	100/80/50%	\$2,000	\$69.45	\$145.64	\$172.70	\$235.40
\$50	100/80/50%	\$2,000	\$64.76	\$135.79	\$161.91	\$220.40
\$100	100/80/50%	\$2,000	\$60.32	\$126.46	\$151.70	\$206.21
\$0	80/80/50%	\$2,000	\$63.41	\$132.95	\$158.81	\$216.09
\$50	80/80/50%	\$2,000	\$58.69	\$123.04	\$147.96	\$200.99
\$100	80/80/50%	\$2,000	\$54.25	\$113.73	\$137.75	\$186.78

Size Discounts

Number of Lives	Percent Discount
3-24	0%
25-49	5%
50+	15%

Area Factors

3-Digit ZIP	Factor
200	1.05
202	1.05
203	1.05
204	1.05
205	1.05
569	1.05

Sentry Life Insurance Company
Monthly Gross Premium Rates
Group Dental Indemnity Policy Form #785-3000 through 785-3110
PROPOSED RATES - Effective 1/1/2013

Exhibit B

Without Ortho							Percent Change
Deductible	Coinsurance	Year Max	Employee	Employee & Spouse	Employee & Children	Full Family	
\$0	100/80/50%	\$500	\$35.00	\$73.49	\$80.50	\$112.00	0.7%
\$50	100/80/50%	\$500	\$32.22	\$67.67	\$74.12	\$103.13	1.9%
\$100	100/80/50%	\$500	\$29.62	\$62.20	\$68.11	\$94.77	3.3%
\$0	80/80/50%	\$500	\$32.24	\$67.71	\$74.15	\$103.17	-1.8%
\$50	80/80/50%	\$500	\$29.68	\$62.34	\$68.29	\$95.01	0.0%
\$100	80/80/50%	\$500	\$27.28	\$57.29	\$62.75	\$87.31	2.0%
\$0	100/80/50%	\$1,000	\$53.85	\$113.07	\$123.84	\$172.31	0.7%
\$50	100/80/50%	\$1,000	\$49.58	\$104.12	\$114.04	\$158.67	0.0%
\$100	100/80/50%	\$1,000	\$45.57	\$95.68	\$104.81	\$145.81	-0.6%
\$0	80/80/50%	\$1,000	\$49.61	\$104.16	\$114.09	\$158.73	0.0%
\$50	80/80/50%	\$1,000	\$45.68	\$95.91	\$105.06	\$146.17	0.0%
\$100	80/80/50%	\$1,000	\$41.98	\$88.15	\$96.54	\$134.33	0.0%
\$0	100/80/50%	\$1,500	\$63.86	\$134.11	\$146.87	\$204.36	-0.2%
\$50	100/80/50%	\$1,500	\$58.80	\$123.48	\$135.24	\$188.18	-1.1%
\$100	100/80/50%	\$1,500	\$54.03	\$113.49	\$124.30	\$172.93	-2.0%
\$0	80/80/50%	\$1,500	\$58.83	\$123.54	\$135.30	\$188.25	0.2%
\$50	80/80/50%	\$1,500	\$54.17	\$113.76	\$124.59	\$173.34	0.0%
\$100	80/80/50%	\$1,500	\$49.78	\$104.54	\$114.50	\$159.31	-0.3%
\$0	100/80/50%	\$2,000	\$66.72	\$140.10	\$153.44	\$213.48	-0.9%
\$50	100/80/50%	\$2,000	\$61.43	\$129.00	\$141.29	\$196.58	-2.0%
\$100	100/80/50%	\$2,000	\$56.45	\$118.56	\$129.85	\$180.65	-3.0%
\$0	80/80/50%	\$2,000	\$61.47	\$129.06	\$141.36	\$196.67	0.3%
\$50	80/80/50%	\$2,000	\$56.59	\$118.84	\$130.16	\$181.09	0.0%
\$100	80/80/50%	\$2,000	\$52.01	\$109.21	\$119.62	\$166.43	-0.3%

With Ortho							Percent Change
Deductible	Coinsurance	Year Max	Employee	Employee & Spouse	Employee & Children	Full Family	
\$0	100/80/50%	\$500	\$37.10	\$77.69	\$98.30	\$131.90	0.7%
\$50	100/80/50%	\$500	\$34.32	\$71.88	\$91.92	\$123.03	1.7%
\$100	100/80/50%	\$500	\$31.72	\$66.40	\$85.91	\$114.67	3.1%
\$0	80/80/50%	\$500	\$34.34	\$71.91	\$91.95	\$123.07	-1.7%
\$50	80/80/50%	\$500	\$31.78	\$66.55	\$86.08	\$114.90	0.0%
\$100	80/80/50%	\$500	\$29.38	\$61.50	\$80.55	\$107.20	1.8%
\$0	100/80/50%	\$1,000	\$55.95	\$117.27	\$141.64	\$192.21	0.6%
\$50	100/80/50%	\$1,000	\$51.68	\$108.32	\$131.84	\$178.56	0.0%
\$100	100/80/50%	\$1,000	\$47.67	\$99.88	\$122.60	\$165.71	-0.6%
\$0	80/80/50%	\$1,000	\$51.71	\$108.36	\$131.88	\$178.63	0.0%
\$50	80/80/50%	\$1,000	\$47.78	\$100.12	\$122.85	\$166.07	0.0%
\$100	80/80/50%	\$1,000	\$44.08	\$92.36	\$114.34	\$154.23	0.0%
\$0	100/80/50%	\$1,500	\$65.97	\$138.31	\$164.67	\$224.26	-0.1%
\$50	100/80/50%	\$1,500	\$60.90	\$127.68	\$153.04	\$208.07	-1.0%
\$100	100/80/50%	\$1,500	\$56.13	\$117.69	\$142.09	\$192.83	-2.0%
\$0	80/80/50%	\$1,500	\$60.93	\$127.74	\$153.10	\$208.15	0.2%
\$50	80/80/50%	\$1,500	\$56.28	\$117.96	\$142.39	\$193.24	0.0%
\$100	80/80/50%	\$1,500	\$51.89	\$108.74	\$132.29	\$179.21	-0.2%
\$0	100/80/50%	\$2,000	\$68.82	\$144.30	\$171.24	\$233.38	-0.9%
\$50	100/80/50%	\$2,000	\$63.54	\$133.20	\$159.09	\$216.48	-1.9%
\$100	100/80/50%	\$2,000	\$58.55	\$122.76	\$147.64	\$200.55	-2.9%
\$0	80/80/50%	\$2,000	\$63.57	\$133.26	\$159.15	\$216.57	0.3%
\$50	80/80/50%	\$2,000	\$58.69	\$123.04	\$147.96	\$200.99	0.0%
\$100	80/80/50%	\$2,000	\$54.11	\$113.41	\$137.42	\$186.33	-0.3%

Size Discounts

Number of Lives	Percent Discount
3-24	0%
25-49	5%
50+	15%

Area Factors

3-Digit ZIP	Factor
200	1.05
202	1.05
203	1.05
204	1.05
205	1.05
569	1.05

